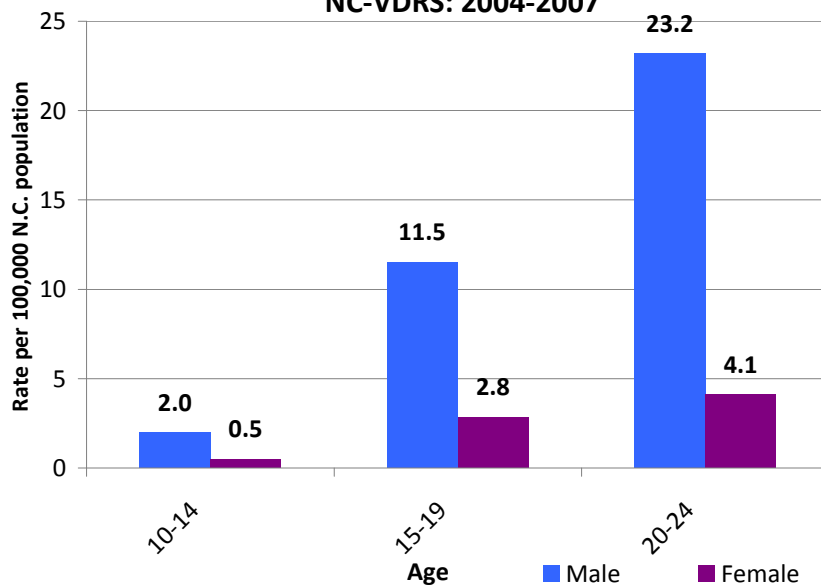


YOUTH SUICIDE IN NORTH CAROLINA

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in N.C. resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention, and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports, and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. NC-VDRS began collecting data in January, 2004. This document summarizes deaths among N.C. residents ages 10 to 24 years completing suicide for the years 2004-2007.

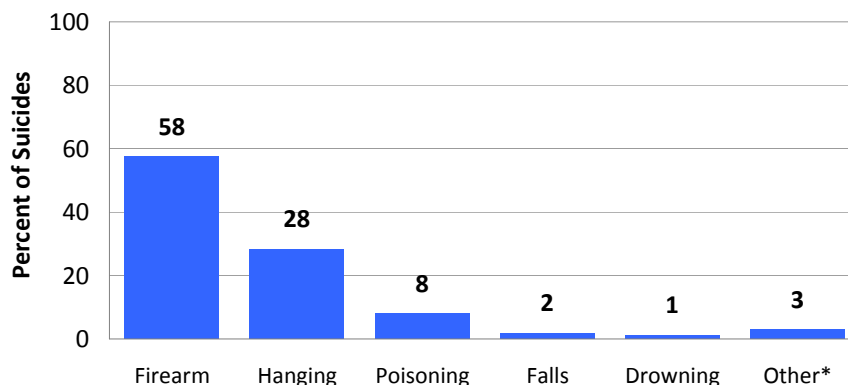
Gender Specific Suicide Rates by Age:
NC-VDRS: 2004-2007



- Between 2004 and 2007, nearly 1,300 North Carolina residents ages 10 to 24 died as a result of violence. Of those, 544 were suicide-related.
- Males consistently had a higher suicide rate than females, regardless of age.
- The suicide rate peaked for young adults ages 20-24, with a secondary peak in the 15-19 age group.

- 78 percent of all suicide victims were identified as white, 19 percent black, and 3 percent of belonging to an other racial/ethnic group.

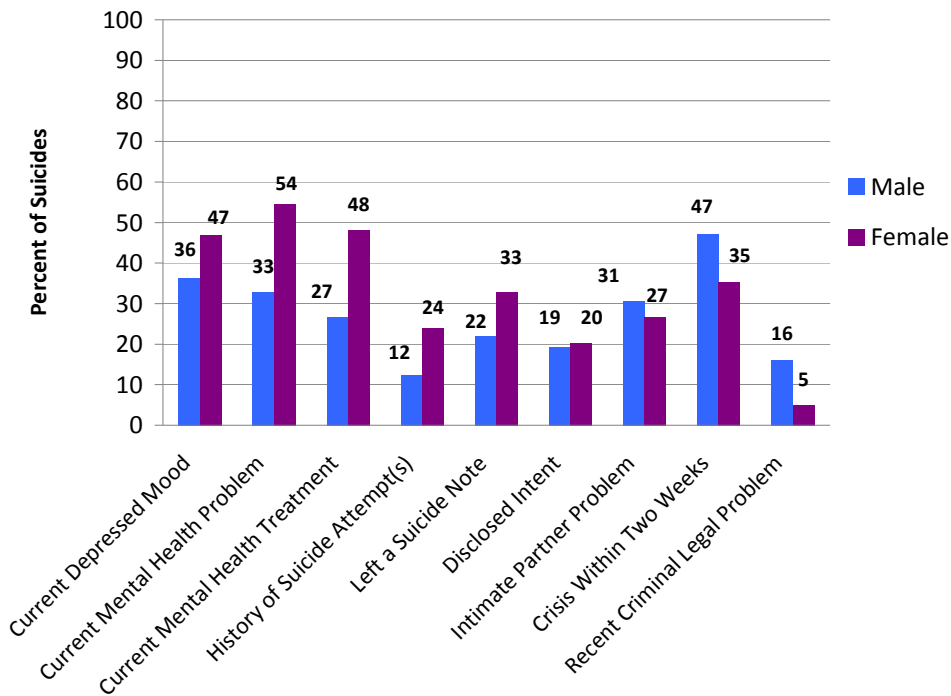
Method of Death: N.C. 2004-2007



- Overall, 58 percent of suicides involved firearms followed by hanging/strangulation/suffocation (28 percent) and poisoning (8 percent).
- Less than 10 percent of suicides were accomplished using a method other than firearms, hanging, or poisoning.

*Other includes sharp instrument, fire/burns, motor vehicle, and other causes of suicide.

Suicide Circumstances*: NC-VDRS: 2004-2007



*among those cases with circumstance information reported

- Nearly one-half (45 percent) of youth suicide victims with circumstance information were categorized as having a crisis within the past two weeks.
- 55 percent of all female victims and 33 percent of all male victims had been characterized as having a current mental health problem by a medical professional.
- A similar trend was seen in mental health treatment. 48 percent of females versus 27 percent of males were being treated for a mental health problem at the time of death.
- Males (47 percent) were more likely to have experienced a crisis within two weeks of death compared to females (35%).

- 19 percent of male and 20 percent of female victims had disclosed their intent to commit suicide to someone else.
- Females (33 percent) were more likely to leave a suicide note than males (22 percent).

More information on suicide prevention efforts can be found at:

State Resource Partners

Mental Health Association in North Carolina, Inc.

Contact: Romaine E. Riddle 919-866-3272

www.mha-nc.org

N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services

www.ncdhhs.gov/mhddsas

North Carolina Office of the Chief Medical Examiner

Contact: Krista Ragan, Child Death Investigator, 919-445-4414

www.ocme.unc.edu

The Triangle Consortium for Suicide Prevention

Contact: Phil Morse

www.trianglesuicideprevention.org

National Resources

The Suicide Prevention Resource Center

www.sprc.org

The American Foundation for Suicide Prevention

www.afsp.org

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5U17/CE423098-07 from the Centers for Disease Control and Prevention (CDC).

N.C. Division of Public Health / www.ncpublichealth.com / Injury Epidemiology & Surveillance Unit/ 919-707-5425 / www.injuryfreenc.ncdhhs.gov

N.C. Violent Death Reporting System / 919-707-5432

State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov

N.C. DHHS is an equal opportunity employer and provider. 2007 FINAL DATA 07/10.